

We recommend that you print a copy of this receipt for your records. Should you wish to save an electronic copy of this receipt, please follow these steps:

- 1.Go to "File" on your toolbar
- 2.Click "Save as"
- 3.Save as a text file
- 4.Select where you wish to save the receipt

Your transaction was completed successfully.

Transaction ID #: 8299537
Issued: 22-May-2022 07:29 PM

Information

Salutation (optional):
 First Name*: Christine
 Last Name*: Massey
 Organization Name (optional):
 Address line 1*: [REDACTED]
 Address line 2 (optional):
 City / Town*: Peterborough
 Province/State*: Ontario
 Postal/ZIP Code*: [REDACTED]
 Country*: Canada
 Telephone No.*: [REDACTED]
 Alternate No. (optional):
 E-Mail (optional): cmssyc@gmail.com

Description

Freedom Of Information Request	\$5.00
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Base Amount:\$5.00

Records Requested*: All records in the possession, custody or control of Eileen de Villa or Toronto Public Health (TPH) that describe the methodologies/protocols used at TPH to investigate and test for "monkeypox virus". All records in the possession, custody or control of Eileen de Villa or Toronto Public Health (TPH) that describe the validation of any tests used at TPH to test for "monkeypox virus".

City Division (optional): Public Health

Date From (optional):

Do not reply to this email - FOI Request Receipt #25725100

mfippa_requests@toronto.ca <mfippa_requests@toronto.ca>
To: mfippa_requests@toronto.ca
Cc: cmssyc@gmail.com

Sun, May 22, 2022 at 7:35 PM

We have received your 1 freedom of information request(s)

The City will respond to a request within 30 days of receiving the request. Please do not reply to this email. If you have any questions pertaining to your request, please contact the Access and Privacy unit at 416-392-9684.

Credit Card Transaction Information

Total Amount Paid: \$5

Authorization Message: Transaction Approved. Authorization Number: 081305. 01/027 APPROVED - THANK YOU

Credit Card Type: [REDACTED]